### **FORM D**



## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

#### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APPROVAL										
OMB Num	ber:	3235-0076								
Expires:	Apri	il 30,2008 ge burden								
Estimated	avera	ge burden								
hours per r	espor	nse 16.00								

SEC USE ONLY									
Şerial									
ECEIVED									
- 1									

V0V4V841	UNIFORM LIMITED OFFERING EXEM	PTION L
Name of Offering     check is	this is an amendment and name has changed, and indicate change.)	High Processing
Filing Under (Check box(es) that Type of Filing:	apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
	A. BASIC IDENTIFICATION DATA	MAK U Q AUSU
1. Enter the information reques	sted about the issuer	
Name of Issuer ( check if the SIGNATURE DEVICES, INC	is is an amendment and name has changed, and indicate change.)	Washington, DC 101
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Ares Code)
3000 Bridge Perkway, Suite	101, Redwood City, CA 94065	(650) 654-4800
Address of Principal Business Optif different from Executive Office N/A		Telephone Number (Including Area Code)
Brief Description of Business		
Company creates, develops electronic products	& manufactures advanced information technologies, including of	•
Type of Business Organization Corporation business trust	timited partnership, already formed   other ()   timited partnership, to be formed	PROCESSEI MAR 1.2.2008
	Month Year  rporation or Organization: OTT OTT Actual Esti- biganization: (Enter two-letter U.S. Postal Service abbreviation for State  CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS		
Federal: Who Must File: All issuers makin 77d(6).	g an offering of securities in reliance on an exemption under Regulation D	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
and Exchange Commission (SEC	filed no later than 15 days after the first sale of securities in the offering on the earlier of the date it is received by the SEC at the address given by mailed by United States registered or certified mail to that address.	
Where To File: U.S. Securities a	nd Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	1549,
	of this notice must be filed with the SEC, one of which must be manual ed copy or bear typed or printed signatures.	ly signed. Any copies not manually signed must be
	ing must contain all information requested. Amendments need only repoint Part C, and any material changes from the information previously supp	
Filing Fee: There is no federal (	iling fee.	
ULOE and that have adopted th	exte reliance on the Uniform Limited Offering Exemption (ULOE) for s is form, Issuers relying on ULOE must file a separate notice with the s f a state requires the payment of a fee as a precondition to the claim for	Securities Administrator in each state where sales

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

this notice and must be completed.

filing of a federal notice.

		A. BASIGID	ENTINCATION DATA		
Each beneficial ow	the issuer, if the issuer having the pow	sucr has been organized were to vote or dispose, or di	• • • • • • • • • • • • • • • • • • • •	-	f a class of equity securities of the iss partnership issuers; and
Each general and n     heck Box(es) that Apply:	Promoter	f partnership issuers.  Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
uli Name (Last name first, i furley, Kenneth L.	f individual)				menaging / A. inc.
susiness or Residence Addression Bridge Parkway, Su			ode)		
Theck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	nde)	<del></del>	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	( individual)				
lusiness or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	ı	
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
Jusiness or Residence Addre	as (Number and	Street, City, State, Zip Co	ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)				
business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Lost name first, ì	f individual)	······································			
jusiness or Residence Addre	ss (Number and	Street, City, State, Zip Co	odt)	···	
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
ull Name (Last name first, i	f individual)	<del></del>			
Business or Residence Addre	ss (Number and	Street, City, State, Zip Co	ode)	······································	
	(Use bla	nk sheet, or copy and use	additional copies of this a	heel as necessary	<u> </u>

		5 - 1A		J. B. II	PORMAT	ION ABOU	T OFFERI	NO.	7 36	10 N X		ু বুল কুপ
1	. i.e		ha la		U 40.000	السناليمين		abie = M			Yes	No
1. Has the	c (220ct 20)	d, or does t			•	-			•		C	
					Appendix	•	_				s_5,0	00.00
What is the minimum investment that will be accepted from any individual?  Does the offering permit joint ownership of a single unit?												
3. Does t	he offering	permit join	t ownershi	p of a sing	le unit?	والمراجعة	*********			********	Yes	N <sub>0</sub>
		tion reques					•	•	-	, ,		
		ilar remuni										
or state	son to ne ii: :s. list the n	sted is an as ame of the l	sociated pe sroker or di	ason or ago caler. If m	nc than fiv	e (3) persuit	r registered na in he list	a with the S led are asso	et anavor ciated pers	with a state tons of suct	; 1	
		, you may :									-	
Full Name	(Last name	first, if ind	ividual)								·	
Business or	Residence	Address ()	Number en	d Street, C	ity, State, 2	Lip Code)					<u></u>	<u></u>
Name of As	sociated B	roker or De	aler								· · · · · · · · · · · · · · · · · · ·	·
								·				
		n Listed Ha s" or check									رم د د	l States
(Cilcum	. Mil Sime	2 in cheek	Intrividual	313165/	***********		4+ + 4 2 <del>0 2 4 4</del> 2 4 - 4 - <del>2 2</del> 4 4	*******			U ^'	i giaica
AL.	<b>AK</b>	AZ.	AR	CA	CO	CT	(DE)	(DC)	(FL)	GA	$\bigcirc$	Œ
	[אַנ]	IA	KS	KY)	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	(NII)	NI	[KM]	[NY]	(NC)	[ND]	OII	OK	OR	PA
RI	<u>sc</u>	SD	(TN)	(TX)	UT	VT	$\nabla \Lambda$	WA	WV	(WI)	WY	(PR)
Full Name	(Lasi name	first, if ind	ividual)			<u> </u>	·····			V-1	·	
Business o	r Residence	Address (	Number an	d Street, C	ity, State,	Zip Code)						
Name of As	sociated B	roker or De	aler	<del>,</del>	<del></del>	<u></u>	<u></u>					
States in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	<u> </u>					
		s" or check								<b></b>		States
AL	ΔK	[AZ]	AR	[CA]	CO	(CT)	DE	(DC)	[FL]	GΛ	EE I	ומו
	(N)	ŪĀ	(KS)	(KY)		ME	MD	MA	(MI)	MN	MS	MO
MT	(NE)	NV VV	NH	N	NM)	[NY]	(NC)	(DV)	OH	OK)	OR	PA
RI	SC	SD	TN	ĪX	(UT)	VT	(VA)	WA	WV	(WI)	WY	(PR)
Full Name (	(Last name	first, if ind	ividuel)			<u> </u>					·	<del></del> .
Business o	r Residence	Address (	Number un	d Street C	ity State	Zin Code)		<u></u>				<del></del>
				o ouces, c	, oa.c.							
Name of As	sociated B	roker or Do	aler									
States in W	hich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				. <u>,</u>		
(Check	"All State	s" or check	individual	States)					, , , , , , , , , , , , , , , , , , ,	panoteappessanecedbd	[] Vi	States
AL	(AK)	ĀZ	AR	CA	co	CT	DE	DC	FL	GA	H	
		IA	KS	KY	LA	(ME)	MD	MA	M	MM	M\$	MO
MI	NE	NV	NII	IN	NM	NY)	NC)	ND	OH	OK)	ÓR	PA
RT	(SC)	(SD)		TX	<b>UT</b>	(VT)	$\nabla A$	(WA)	$\{WV\}$	$\{\mathbf{w}\}$	$\overline{\mathbf{W}}$	PR

•	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS	
l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	<del></del>	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		s
		1,000,000.00	\$ 575,000.00
	Common   Preferred		<b>V</b>
	Convertible Securities (including warrants)	<b>.</b>	\$
	Partnership Interests		\$
	Other (Specify)		
		1,000,000.00	\$ 575,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	1	s 575,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)	1	\$ 575,000.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		S
	Regulation A		\$
	Rule 504	common	\$ 575,000.00
	Total		\$ 575.000.00
į	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		S
	Printing and Engraving Costs		\$
	Legal Fees		\$
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		S
	Other Expenses (identify)		\$
	Total		\$_0.00

. ;	COPPERING PRICE, NUM	iber of investors, expenses and use of t	ROCERDS	7.5
	and total expenses furnished in response to Part C-	ering price given in response to Part C — Question I — Question 4.a. This difference is the "adjusted gross		\$
5.	each of the purposes shown. If the amount for a	roceed to the issuer used or proposed to be used for my purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross of C — Question 4.b above.		
	٠.		Payments to Officers, Directors, & Affiliates	Payments to Others
	Purchase of real estate	***************************************	]\$	. 🗆 🖢
	Purchase, rental or leasing and installation of ma	chinery	<i>e</i>	<b></b>
		cilities	_	
	Acquisition of other businesses (including the va	•		U-3
	offering that may be used in exchange for the ass	sets or securities of another		
	·		_	_
	Working capital		<b>7\$</b>	1,000,000.00
	Other (specify):	(	]\$	. 🗆 \$
			]\$	
	Column Totals		\$ 0.00	\$ 1,000,000.00
	Total Payments Listed (column totals added)	\$#\$#\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	□ \$ <u>_1</u> ,	000,000,000
,		D FEDERAL SIGNATURE		
sigi	nature constitutes an undertaking by the issuer to fu	e undersigned duly authorized person. If this notice irnish to the U.S. Securities and Exchange Commis credited investor pursuant to paragraph (b)(2) of F	sion, upon writte	tle 505, the following in request of its staff,
lssi	ner (Print or Type)	Signature 1	)ate	
SIC	SNATURE DEVICES, INC.	Kuntal Husker	February 20, 20	08
Naı	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
(ec	neth L. Hurley	President		

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E STATE SIGNATURE	4.00.1	\$4# · · ·	
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>&amp;</b>	<u></u>
See Anneadix Column 5 for state response			

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) SIGNATURE DEVICES, INC.	Kersett + Henley	Date February 20, 2008
Name (Print or Type)	Title (Print or Type)	
Kenneth L. Hurley	President	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

W.W.				Z AP	PENDIX -	# 14 A T	<u> </u>		
	Intend to non-a investor	to sell ccredited s in State -ltem ()	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualificatio under State ULG (if yes, attach explanation of waiver granted (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									ì
AZ									
AR									
CA									
CO	į								
СТ		1							
ЭG	1								
DC									[]
FL									ſ. <u>.</u> .
GA									(, <u> </u>
HI									
ID			,						
แ									
NI									
1A									
KS								,	
KY									T
LA									
ME									
MD	and the second s								Ţ <u>,</u>
MA									
мі									
MN		X	common	1	\$425,000.00				×
MS									

				T APP	ENDIX	# <sub>1</sub>	N. A.				
	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Accredited Non-Accredited						
мо								_			
мт											
NE											
NV											
NH											
NJ									i		
NM											
NY											
NC											
ИD											
ОН											
ок								ì	Γ		
OR											
PA											
RI		,									
SC	<del></del>								<u> </u>		
SD	,								<u> </u>		
TN			<u></u>		, , , , , , , , , , , , , , , , , , , ,						
ТХ		X	common	1	\$575,000.00				×		
UT											
Vī		1						,	·		
٧٨	-			<del> </del>							
WA							<u> </u>				
wv											
WI	,								<u> </u>		

(A.C.)	(1) July 17		Carlotte Control	APP	ENDÍX.		· 人们会会			
I	Intend to sell to non-accredited investors in State (Part B-Item 1)		to non-accredited offering price investors in State offered in state		Type of investor and amount purchased in State (Part C-Hern 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

